APPROVED BY-

CONDITIONS OF APPROVAL, IF ANY:

Form	C	-10	3
Revis	d	1-1	-89

Submit 3 Copies to Appropriate District Celling	Energy, Minerals and Natural Resources Department		Form C-103 Revised 1-1-89		
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT II P.O. Drawer DD, Artesia, NM 88210		WELL API NO. 30-025-31973 5. Indicate Type of Lease			
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87	/410		STATE X 6. State Oil & Gas Lease No. B-9613	FEE 📙	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		7. Lease Name or Unit Agreement Name WEST DOLLARHIDE DRINKARD UNIT			
1. Type of Well: OL GAS WELL X WELL		•			
2. Name of Operator TEXACO EXPLORATION A	AND PRODUCTION INC.		8. Well No. 126		
3. Address of Operator P. O. Box 3109	Midland, Texas 79702		9. Pool name or Wildcat DOLLARHIDE TUBB DRINKARD		
4. Well Location	2450 Feet From The SOUTH	Line and		Line	
Section 33	//////////// GR-3176', KB-	hether DF, RKB, RT, GR, etc.) 3189'	NMPM LEA	County	
	eck Appropriate Box to Indic INTENTION TO:	· · · · · · · · · · · · · · · · · · ·	eport, or Other Data SEQUENT REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	GOPNS. DPLUG AND ABANDON	NMENT	
PULL OR ALTER CASING		!	CASING TEST AND CEMENT JOB		
OTHER:		OTHER: PRODUCTIO	N CASING	×	
12. Describe Proposed or Completed work) SEE RULE 1103.	Operations (Clearly state all pertinent des	tails, and give pertinent dates, inclu	ding estimated date of starting any proposed		
2. HLS RAN GR-CSL-DLL- 3. RAN 110 JOINTS OF 5 1 SET @ 7555'. 4. DOWELL CEMENTED WI	MSFL-CAL, GR-CSNG-SDL-D 1/2, 15.5# WC-50, 29 JOINT ITH 2450 SACKS 35/65 POZ (SN-CAL FROM 7555' TO 'S OF 17# WC-50 AND 3 CLASS H W/6% GEL, 5%	0 7555'. TD @ 1:00 PM 07-13-9 5200'. PULLED GR-CNL TO SURF 9 JOINTS OF 17# L-80, LTC CAS SALT, 1/4# FLOCELE (12.8 PPG ::05 AM 07-15-93. CIRCULATED	FACE. ING 1,	
SACKS. 5. ND. RELEASE RIG @ 11: 6. PREP TO COMPLETE.	00 AM 07-15-93.				
I hereby certify that the information above	e is true and complete to the best of my knowle sham / SpOH	dge and belief. TITLE DRILLING OPERAT	IONS MANAGER DATE 07-19-93	3	
TYPE OR PRINT NAME C.P. BASH	AM		TELEPHONE NO. 91		
(This space for State Use)	Orig. Signed by				
APPROVED BY	Paul Kautz	_ піл	DATE		